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\*\* CONTINUING DATA \*\*\*\*\*  
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\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 CANADA 2,342.709 03/23/2001 *CROR*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 2	TOTAL CLAIMS 65	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>			

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TITLE

Methods for dental restoration

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